

# Holy Cross Academy Pre-Admission Form

Year your child will enter HCA: \_\_\_\_\_ Grade: \_\_\_\_\_ Sibling at HCA? \_\_\_\_\_

\*Please Note: Children entering Kindergarten must be 5 years old by September 30.  
Children entering First Grade must be 6 years old by September 30.

## **Student Information:**

\_\_\_\_\_  
Last Name First Middle

Male: \_\_\_ Female: \_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Country of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Registered Parish: \_\_\_\_\_

Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Please indicate any educational or psychological testing or services your child has received:

\_\_\_\_\_  
\_\_\_\_\_

## **Parent Information:**

**Father**

**Mother**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Religion/Parish: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**CATHOLIC APPLICANTS: ATTACH A COPY OF BAPTISMAL CERTIFICATE**

**ALL INFORMATION MUST BE COMPLETE IN ORDER TO BE PLACED ON OUR PRE-ADMISSION LIST**

